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ABSTRACT

This guide to the Early Periodic Screening, Diagnosis and Treatment (EPSDT) program is designed for use by health coordinators of Head Start programs. The guide defines the major components of the EPSDT program and outlines what a health coordinator should know and do to utilize the program for delivering services to Medicaid eligible children. The "Preparation" section focuses on getting ready for the school year, including contacting persons or agencies outside of Head Start. Sample letters to a state EPSDT coordinator and a screening provider are included. In subsequent sections, three major functions and activities which Head Start can perform in using EPSDT resources are identified. All three activities--outreach, arranging for screening and follow-up--are discussed in detail. Outreach informs all families eligible for Medicaid about EPSDT. Arranging for screening involves identifying screening providers, scheduling appointments and overcoming barriers which might prevent the family from receiving service. Follow-up ensures either that all health problems detected through screening receive continuing care until they are remedied, or that a pattern of continuing care is established. The appendix consists of a list of state EPSDT agencies and their addresses. (Author/CM)

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EPSDT...A How-to Guide for Head Start Programs

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E P S D T ... A HOW-TO GUIDE

FOR HEAD START PROGRAMS

U. S. DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE
Office of Human Development Services
Administration for Children, Youth and Families
Head Start Bureau

DHEW Publication No. (OHDS) 78-31119

MEMORANDUM

DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE
OFFICE OF THE SECRETARY

TO : Head Start Directors
Health Coordinators
Social Service Coordinators

DATE: August, 1978

FROM : Dr. Blandina Cardenas
Commissioner, Administration for
Children, Youth and Families

SUBJECT: EPSDT ... A How to Guide for Head Start Programs

The following is a copy of EPSDT ... A How to Guide for Head Start Programs. This manual has been developed as a result of requests from Head Start staff in their use of EPSDT services for Medicaid eligible enrolled Head Start children. It is a companion to Head Start and EPSDT -- Recipes for Success published in 1977.

The Guide details what the Head Start staff need to know about the EPSDT program and what specific actions should be taken so that programs and families can make maximum use of the EPSDT program. The Guide is meant to be used as a workbook. It details step-by-step activities.

It is the philosophy of the Head Start Bureau that each child should have on-going health care even after the child is no longer enrolled in the Head Start program. The EPSDT program is a significant step forward toward reaching this goal for the Medicaid eligible child.

If you have any questions regarding the EPSDT program, contact Linda A. Randolph, M.D., M.P.H., Director, Health Services, P.O. Box 1182, Washington, D.C. 20013, (202)755-7944.

Blandina Cardenas

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INTRODUCTION

This booklet was designed for use by health coordinators or Head Start staff persons responsible for the health component of Head Start programs. The purpose of this booklet is:

1. To help new health staff understand the EPSDT program.

2. To show health staff how Head Start can use EPSDT to meet its health program objectives.

3. To identify what a person must KNOW and what a person can DO to participate in the EPSDT program.

A previous publication, Recipes for Success, Head Start and EPSDT*, describes the history of EPSDT and the Head Start/EPSDT Collaborative Effort and offers approaches or "recipes" developed by health coordinators for working together with EPSDT. This booklet is intended to be a companion to Recipes for Success. Copies of Recipes for Success were sent to all Head Start grantees by the Office of Child Development in the fall of 1976. Material in Recipes is not duplicated here. However, the reader will find recommendations to review Recipes in this booklet.

EPSDT - A How To Book for Head Start is action-oriented. It defines the major components of the EPSDT program and outlines what a health coordinator should know and do to utilize the program. It tries to take into account variations in Head Start programs and states' EPSDT programs. This booklet is intended to be a guide to a successful approach and help Head Start health staff take action and utilize the resources available through EPSDT to the fullest extent.

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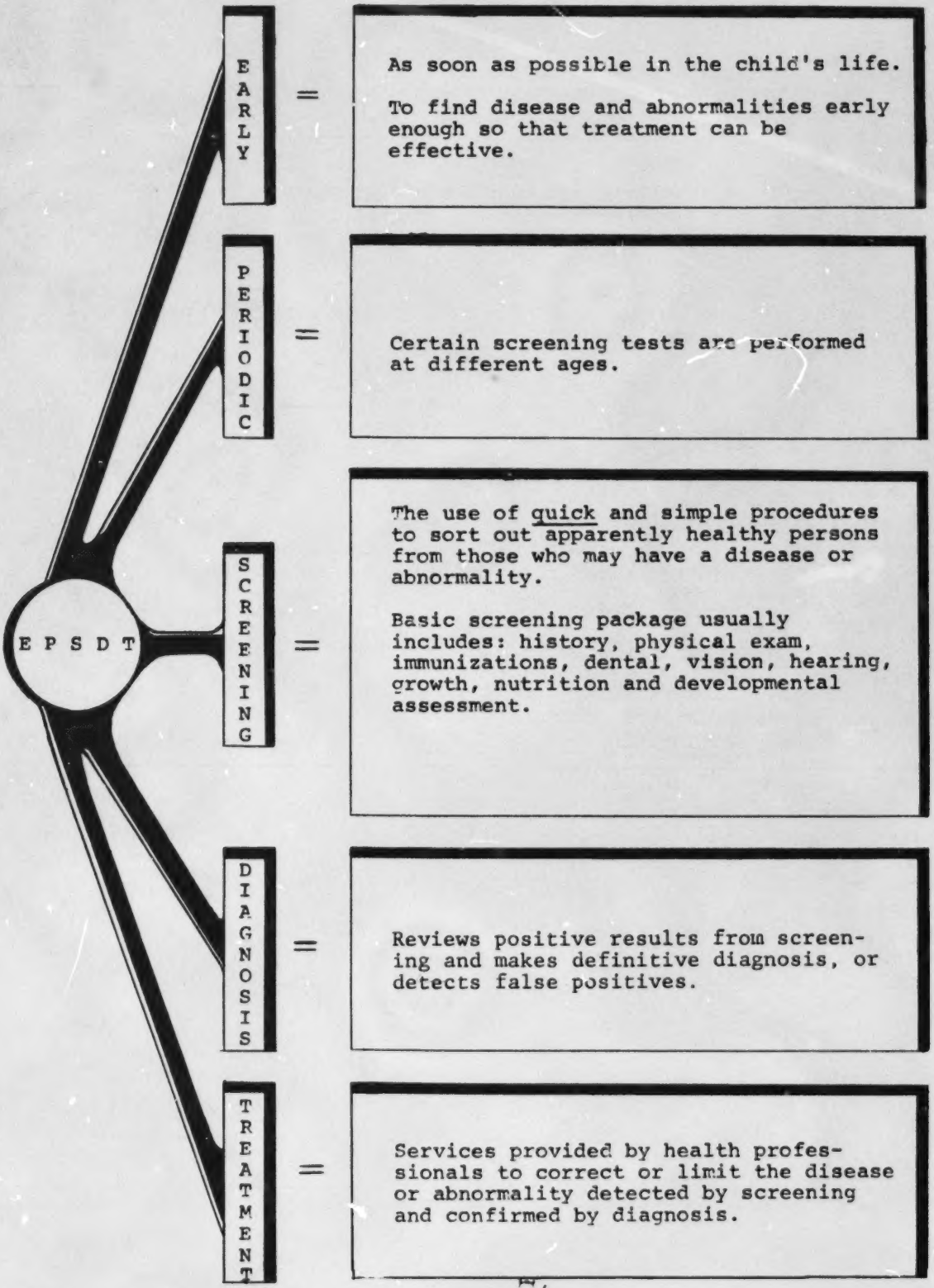
*DHEW Publication No. (OHD) 76-31097. Write ACYF, Box 1182, Washington, D.C. 20013 for copy of Recipes for Success.


E P S D T
EARLY
=
As soon as possible in the child's life.
To find disease and abnormalities early enough so that treatment can be effective.
PERIODIC
=
Certain screening tests are performed at different ages.
SCREENING
=
The use of quick and simple procedures to sort out apparently healthy persons from those who may have a disease or abnormality.
Basic screening package usually includes: history, physical exam, immunizations, dental, vision, hearing, growth, nutrition and developmental assessment.
DIAGNOSIS
=
Reviews positive results from screening and makes definitive diagnosis, or detects false positives.
TREATMENT
=
Services provided by health professionals to correct or limit the disease or abnormality detected by screening and confirmed by diagnosis.

HOW TO USE THE PREPARATION SECTION

Utilizing EPSDT resources in Head Start is rather like learning to dance. At first each step seems separate and distinct from the others. Only later does the experienced person realize that steps flow into each other and one step cannot always be distinguished from another. Rather -- the whole activity is a rhythmic interweaving -- a pattern. Until one learns the pattern, however, there is awkwardness and uncertainty.

After you learn to interweave EPSDT with your other Head Start services, your knowledge will guide you in selecting the appropriate activity at the right time. Until then, however, you might find it useful to prepare a calendar of EPSDT activities which can serve as a checklist to ensure that all the critical steps were performed in an appropriate sequence. Later, with more experience, you will be able to proceed through the year without the help of the calendar. Until then, it will help you cover all the bases.

The Preparation section is designed to help you get ready for the school year. Steps 1-3 require you to initiate a request to a person or agency outside of Head Start. These steps can be performed at any time, but ideally should be completed well before the beginning of the school year. Steps 4-7 are program activities and should be initiated right at the beginning of the school year. As you read this section now, pencil in some tentative target dates for completion of these activities. As you complete them, enter the date of completion near the target date. This provides both a planning tool and a checklist for EPSDT activities.

PREPARATION

1. WRITE FOR STATE EPSDT PLAN

TARGET DATE	DATE COMPLETED

Appendix A lists the names and addresses of the EPSDT Coordinator and agency in each state. There is a sample letter at the end of this section which might be helpful to you in composing your letter. The next section "State Plan" will guide you in understanding the State plan.

2. MEET WITH LOCAL COUNTY OR DISTRICT EPSDT AGENCY (HEALTH OR WELFARE) TO DISCUSS COORDINATING WITH HEAD START

TARGET DATE	DATE COMPLETED

Inform them of Head Start health program goals and responsibilities. Tell them the number of EPSDT-eligible children enrolled. During the meeting, try to get clarification on these points:

A. What procedures should be followed to verify Medicaid eligibility?

B. What are the requirements for exchanging information with Head Start about results of screening, diagnosis and treatment?

C. Is a consent form required?

D. How will Head Start be able to determine which children:

   1. are eligible for the EPSDT program

   2. were screened within the last year

   3. are eligible for screening this year?

E. Does the state or county have a system to track* participants in the EPSDT program? Would Head Start be able to obtain any of this information if available?

F. Develop procedures for collaborating Head Start with the EPSDT program. It will be very helpful to develop written agreements between Head Start and the local agencies responsible for EPSDT services. Identify a specific person you can contact if problems occur.

3. CONTACT LOCAL EPSDT PROVIDER(S)

TARGET DATE	DATE COMPLETED

Discuss the following points with health providers in person, by letter or by phone.

A. Who you are and your involvement in the Head Start and EPSDT programs.

B. Head Start provides supportive services, i.e., transportation or babysitting, and follow-up assistance until children receive all necessary treatment.

C. Head Start's assistance to families can reduce missed/broken appointments.

D. The provider's preferred method for scheduling appointments.

E. Procedures for exchanging information on results of screening, diagnosis and treatment of Head Start children.

F. Your awareness of the need to handle medical records in a confidential way and your agency's plan to limit access to medical records.

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*A tracking system may be manual or automated. It is a method of monitoring the client's progress by documenting the request for screening, broken appointments, need for follow-up, etc. Also called "case management."

A sample letter is provided at the end of this section which may help you in contacting providers.

Be sure to visit a screening site if you can!

4. MEET WITH YOUR HEALTH SERVICE ADVISORY COMMITTEE TO PLAN FOR EPSDT SERVICES

TARGET DATE	DATE COMPLETED

A. Review information about the state EPSDT plan for utilizing EPSDT resources.

B. Compare the EPSDT screening package and periodicity schedule* with Head Start performance standards and the periodicity schedule recommended for Head Start.

C. Call or write your regional Health Liaison Specialist** if you have questions about whether your state's EPSDT programs meets the Head Start performance standards.

Suggestion: Include a representative from the local EPSDT program as a member of the Health Service Advisory Committee.

5. DETERMINE WHO, WHEN AND HOW EPSDT OUTREACH WILL BE DONE

TARGET DATE	DATE COMPLETED

Discuss with your program director and other appropriate staff:

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*A "periodicity schedule" tells how often a child is eligible for screening, e.g., every two years.
**Regional Health Liaison Specialists are resource persons available to Head Start programs for training and technical assistance in the health area. Their names and addresses can be obtained from your Regional Office of Administration for Children, Youth and Families.

A. Who will do outreach.

Knowing which methods of outreach your program selects, the size of the program, the location of family homes, and which staff already have contact with families on a regular basis will help answer this question.

1. Staff currently doing outreach on a regular basis with families.

2. Other staff -- who will be trained to do outreach for EPSDT.

B. When outreach will be done. You should plan to:

1. Allow enough time to have children screened before enrollment, or

2. Allow screening appointments to be scheduled as soon as the child enters the Head Start program.

C. How outreach can be done.

1. During home visits.

2. On a group or individual basis -- at the center.

6. PLAN AND CONDUCT HEAD START STAFF EPSDT OUTREACH TRAINING

TARGET DATE	DATE COMPLETED

As a result of training, staff should be able to:

A. Explain EPSDT in words understandable to families.

B. Explain advantages of prevention and early detection of disease.

C. Explain how to participate in EPSDT.

D. Ask families for the information you need to help them secure EPSDT services.

NOTE: EPSDT training Materials are available by contacting your Regional Health Liaison Specialist.

7. DEVELOP A MONITORING SYSTEM FOR FOLLOW-UP	TARGET DATE	DATE COMPLETED

Review Section VI, "Referral and Follow-Up" and Section VII "Record Keeping" in Recipes for Success for suggestions.

SAMPLE LETTER TO STATE EPSDT COORDINATOR

EPSDT Coordinator
State Medicaid Agency (by name)
State Capitol City, State

Dear EPSDT Coordinator:

I am the health coordinator at _____ Head Start program in (City). During the course of our program year, we provide complete health services to (Number) of enrolled children. Of these, about (Number or Percent) are eligible for EPSDT services under the Medicaid plan. In preparing for these children to receive EPSDT services, our program needs some specific information about (State's) EPSDT plan. The facts we need include:

- Who is eligible (categories and income levels)?
- What tests and procedures are included in the screening package? What tests are optional?
- At what ages is a complete screening performed? Are follow-up or partial screenings performed at other times? What ages?
- What tests are included in the follow-up screenings?
- Who can perform screening services? Nurses? Pediatric nurse practitioners? Physicians?

If all this information is included in a state plan, please send a copy of that.

We would also appreciate a copy of the screening form and a list of approved screening, diagnosis and treatment providers in our area.

After we become familiar with the information you send, we will schedule a meeting at our local welfare (and/or health) department to discuss agreed upon responsibility for outreach and follow-up activities. Perhaps you could refer us to an appropriate person in the (Name of County) office when you reply.

Many thanks for taking the time to respond to our request. We look forward to working collaboratively with the EPSDT program.

Sincerely,

Health Coordinator

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SAMPLE LETTER TO SCREENING PROVIDER

Dear Dr._____:

I am the health coordinator for the_____ Head Start program (in, at)_____. Each year, we try to arrange for complete screening, diagnosis and treatment services for the children enrolled in our program. This year we have enrolled _(Number)_____ children between the ages of 3 and 5. About_____ percent of these are eligible for the EPSDT services provided under the_____(State)_____ Medicaid program.

Parents of children applying for entrance into our Head Start program told us their children have received services from you in the past. We encourage parents to continue using their regular provider when arranging for health care during their child's enrollment. Our program provides supportive services, including transportation and babysitting, to families, where needed, to ensure that children enrolled in Head Start can obtain all health services needed. This can help reduce the number of missed appointments scheduled by Head Start children.

When one of our Medicaid-eligible Head Start children is scheduled for an appointment with you this year, he will present a letter from us which identifies him as a Head Start child. It would help us complete our records and avoid duplication of services if you would send us a copy of screening results when you see a Head Start/EPSDT child. This could either be a copy of the screening form or a statement that results were normal or that diagnosis and treatment were indicated. Naturally, if referral was necessary, we would like the name of the provider to whom you referred the child.

A sample release of information form used in our program is enclosed. Our program takes all precautions to protect the privacy of medical information.

Many thanks for your help.

Sincerely,

Health Coordinator

Enclosure

YOUR STATE'S EPSDT PLAN

The Early and Periodic Screening, Diagnosis and Treatment program is a federal program designed to give states responsibility for providing a comprehensive range of health care including preventive health services to Medicaid-eligible children 0-21 years of age. Because EPSDT is primarily a state-administered program, each state defines and implements EPSDT according to its own resources and regulations -- within minimum federal standards.

Most states have a written document which is called the EPSDT* state "plan." Hopefully, you have already written to your state's EPSDT coordinator and requested the plan. Read through the plan carefully to get the following information.

ELIGIBILITY

Who is eligible for EPSDT in your state?

Federal law requires states to include all children from birth to 21 years who are members of families receiving Aid to Families with Dependent Children (AFDC). Some states, in addition to these children, include other children who are determined "medically needy" or medically "indigent." A few states offer screening services, at little or no cost, to children who are not eligible for Medicaid. After reading the state plan, you will have enough information to refer families, who may be eligible to the agency in your community responsible for administering EPSDT.

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*Even the name "EPSDT" is not universal. In Illinois, Hawaii and Oregon, it is Medichek; in California, Child Health and Disability Prevention Program (CHDP); in New York, Child Health Assurance Program (CHAP).

NOTIFICATION

Who is told about EPSDT?

Families eligible for EPSDT are informed about the service at least once a year -- in writing. This means that they receive a brochure in the mail or are given one during eligibility determination at the Welfare Office. You might want to request some brochures from the local welfare office so that Head Start parents can more easily recognize the program when you describe EPSDT services.

SCREENING PACKAGES

What tests and procedures are included in your state's screening package?

Most states offer a "package" of screening tests that meet Head Start health performance standards. Review the list of services offered for the Head Start age child and see if all tests required for Head Start are included in the state screening package. Usually a child receiving his first EPSDT screen receives all tests. Children may be eligible for screening every year, every two years, or less often. To determine your state's frequency of screening services you will have to read its "periodicity" schedule. Compare it to the periodicity schedule recommended by the Administration for Children, Youth and Families in Transmittal Notice 76.6.

HEALTH CARE PROVIDERS

A. Where are screening services available?

Typically, one of three models is used in most states:

1. Screening services are provided by public health departments with referral for diagnosis and treatment to private Medicaid providers.

2. Screening, diagnosis and treatment are provided by private physicians and dentists, hospitals, clinics and other authorized providers including some Head Start programs.

3. A combination of 1 and 2.

The state plan will indicate who is authorized to offer screening services in your state. Your local welfare department or EPSDT agency has a current list of screening providers in your area.

B. Where are diagnosis and treatment services available?

Diagnosis and treatment are available from Medicaid providers. This includes private doctors, hospitals, clinic, dentists and, some health departments.

SUPPORT SERVICES (TRANSPORTATION, CHILD CARE, OUTREACH AND FOLLOW-UP)

A. What transportation services are available for the EPSDT program?

Methods of providing transportation vary widely from state to state and within states. Some typical arrangements include:

1. Reimbursement for mileage to persons using private autos.

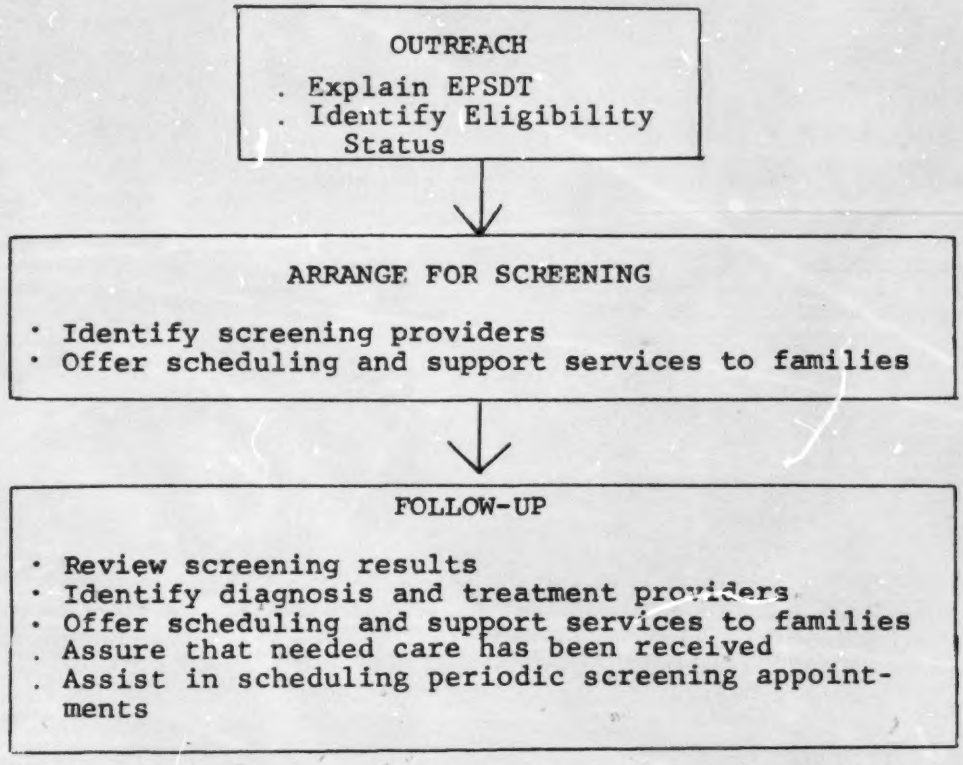
2. Tokens provided by case workers which can be used on public transportation.

3. Contracts with agencies (including Head Start) to provide transportation.

B. Which agency(s) are responsible for outreach and follow-up under the state plan?

It may be the health, welfare or EPSDT agency or another group under contract. Head Start may be able to receive reimbursement for outreach or follow-up activities.

The three major functions and activities Head Start can perform in using EPSDT resources to deliver health services to Medicaid eligible children are outreach, arranging for screening and follow-up.


OUTREACH
. Explain EPSDT
. Identify Eligibility Status
ARRANGE FOR SCREENING
· Identify screening providers
· Offer scheduling and support services to families
FOLLOW-UP
· Review screening results
· Identify diagnosis and treatment providers
· Offer scheduling and support services to families
. Assure that needed care has been received
. Assist in scheduling periodic screening appointments

Each of the next 3 sections discusses one of these in detail. Read through them quickly to get the flow and then study them separately later. You will soon see how "doing your homework" at each step in the process makes the next step easier.

OUTREACH

Definition

Outreach means contacting and encouraging the families of Medicaid-eligible children in the Head Start program to participate in the EPSDT program. It involves educating children and families about the value of preventive health care, the benefits of EPSDT and helping to overcome barriers which might prevent them from receiving services. Brothers and sisters of Head Start children as well as Medicaid-eligible children of non-Head Start families should be included in the outreach effort. In addition, if you believe that the family is "potentially" eligible for Medicaid, encourage the family to have their eligibility determined by welfare.

Goal

To inform all families eligible for Medicaid about EPSDT and promote obtaining the services prior to entry into the Head Start program or as early as possible in the program year.

WHAT TO KNOW	WHAT TO DO
What you must find out from families during EPSDT outreach.	Ask families, in personal interviews or by completing questionnaires:
- Medicaid eligibility status	- if not currently covered by Medicaid, and if you think the family is potentially eligible for Medicaid, assist in making appointments with the welfare office to determine Medicaid eligibility.
	- their Medicaid identification number(s).
	- if their family is currently covered by Medicaid.

WHAT TO KNOW	WHAT TO DO
- if children have already received EPSDT services	- if their child/ children has/have received an EPSDT screening? Diagnosis and treatment? Where? When?
- health care providers presently used by the family	- ask parents to sign release of information form so you can obtain the results of the screen and diagnosis and treatment.

What you must tell families during EPSDT outreach.	Explain to parents, in words understood by families:
What...	- what EPSDT is
Why...	- advantages of early detection and treatment
How...	- how to participate
Where...	- where EPSDT services are located
Assistance available...	- what support services are available

WHAT TO KNOW	WHAT TO DO
Which families will need special assistance before using EPSDT services	Refer persons who may be eligible to the welfare department for eligibility determination
Support services...	- Plan to provide support services--transportation, child care etc.--if families indicate a need.
Other help...	- Be available for more discussion if parents are confused about EPSDT or have a fear of medical service. Refer to your staff social service worker.

ARRANGING FOR SCREENING

Definition

Arranging for screening describes the tasks which come after a family decides to request EPSDT services and which precede the actual screening exam. It includes identifying providers, scheduling appointments, and overcoming barriers which might prevent the family from receiving service.

Goal

All children eligible for EPSDT services will have an appointment for screening, or their health record brought up-to-date, early in the program year. Early completion of screening helps ensure diagnosis and treatment while the child is in Head Start.

WHAT TO KNOW	WHAT TO DO
Which Head Start children are Medicaid eligible.	Using the information gathered during outreach, submit a list with Head Start families' Medicaid numbers to your local welfare or EPSDT office. Ask them to verify current eligibility.
Which Medicaid eligible children in your program are due for screening or rescreening.	Categorize the children eligible for Medicaid into three groups:
See chart in this section for more directions.	- Eligible children not previously screened through EPSDT or due for another screen.

WHAT TO KNOW	WHAT TO DO
	- Children screened through EPSDT within the past year. - Children screened through EPSDT over a year ago and not eligible for another screen based on state's periodicity schedule.*
How to help families select appropriate providers of screening services.	Review lists of providers used in past years. Ask the local health, welfare or EPSDT agency for assistance.
Your role in scheduling EPSDT appointments.	Encourage the family to schedule its own appointment or provide assistance to families in scheduling where necessary.

*This category is not needed in states where children are eligible for screening each year.

CATEGORY A	CATEGORY B	CATEGORY C
Eligible children not previously screened through EPSDT or eligible for another screen.	Children screened through EPSDT within the last year.	Children screened through EPSDT (over one year ago) -- not eligible for another EPSDT screen based on state's periodicity schedule.
ACTION A 1. All these children should have an appointment scheduled as soon as possible. You may: - Ask parents to schedule appointments directly with provider and let you know where and when appointment is scheduled. Sometimes it helps to ask the health department to block out some appointments for Head Start children. - Schedule appointments, where necessary, <u>for</u> parents who for one reason or another cannot or will not--either in groups or individually. A 2. Offer and provide assistance where necessary in: 1. scheduling appointments 2. transportation 3. babysitting A 3. Provide parents with any necessary EPSDT forms used by the state in requesting or scheduling EPSDT services.	**ACTION** B 1. Contact parents and explain why the Head Start program needs the results of the screen. B 2. Arrange to get results from parents or provider. B 3. Review screening results--was D & T <u>needed</u>? <u>YES</u>: Was it completed? - Yes: File results - No: See Follow-up Section <u>NO</u>: Record "no D & T needed"	**ACTION** C 1. Provide these children with any health screenings and examinations not covered by EPSDT but still required by the Head Start Performance Standards based on Head Start periodicity schedule. You will not be able to do this through the EPSDT program because the state will not pay the provider for screenings which are not in accordance with the State's periodicity schedule.* *If the family is currently covered by Medicaid, diagnosis and treatment services may be paid through Medicaid.

FOLLOW-UP

Definition

Follow-up is the process of ensuring that Head Start children receive the diagnosis and treatment they need within a reasonable period of time. Follow-up helps maintain families' contact with health care providers until problems are remedied or a pattern of treatment is established. Other names for follow-up: case management, tracking, referral.

Goal

To ensure that all health problems detected through screening receive competent and continuing care until they are remedied or a pattern of continuing care is established.

WHAT TO KNOW	WHAT TO DO
What results mean. Most screening results are reported as:	Review screening results obtained from parents or providers and classify follow-up as:
Normal (negative) -- no diagnosis and treatment needed.	No action needed -- file results in individual child health record.
Suspect -- retest indicated.	Action needed -- schedule rescreening.
Not tested or unable to test at this time.	Action needed -- schedule rescreening at appropriate time.
Abnormal (positive) -- diagnosis and treatment needed.	Action needed -- refer for diagnosis and then follow steps on next page. or document that child is currently under treatment for condition.

WHAT TO KNOW	WHAT TO DO
Where the child will receive diagnosis and treatment.	Review all "positive" results to determine: If a referral to a specific provider has or has not been made by the screening provider. If the screening provider also provided diagnosis and treatment already.
If the family needs support services to get diagnosis and treatment and when these services should be provided.	Contact parents by phone, in writing, or in person to determine: If assistance is needed in: - scheduling appointments - finding a provider of appropriate services - obtaining transportation to appointments - obtaining child care When and where diagnosis and treatment appointments are scheduled.

WHAT TO KNOW	WHAT TO DO
When diagnosis and treatment is complete or a pattern of care is established.	Use the monitoring system you developed to ensure that:
Suggestion: Review Section VI, "Referral and Follow-up," in Recipes for Success and read the descriptions of monitoring systems.	Appointments are made and kept. Broken appointments are rescheduled.

SAMPLE LETTER -- FOLLOW-UP

Dear Dr. _____:

(Child's Name), who is enrolled in our Head Start program (Address) is under your care for treatment of (Condition). Our performance standards require us to have a completed health record on all children. Please notify us when treatment has been established on a long-term basis or has been completed. Included in this letter is a signed consent form from (Name of parent or guardian) authorizing the release of information to our program. We have established procedures for safeguarding the privacy of all records.

Sincerely,

Health Coordinator

Enc.

AFTER HEAD START...WHAT NEXT?

EPSDT health services help link Head Start children to an on-going health care system. When a child leaves the Head Start program, parents must be provided with a summary of services their child received and should be informed when their child's next screening(s) should occur. You can forward a child's Head Start health record upon request to a provider of the parents' choice if they give consent.

Be sure to emphasize that care was received through the EPSDT program and that they can continue to use this service for all children in the family as long as they are eligible for Medicaid. If the parents do not have a regular source of care for their children, you might recommend providers who have cared for other Head Start children.

APPENDIX

STATE	TITLE OF EPSDT AGENCY
ALABAMA	MEDICAL SERVICES ADMINISTRATION ALABAMA DEPARTMENT OF PUBLIC HEALTH
ALASKA	DEPARTMENT OF HEALTH & SOCIAL SERVICES
ARKANSAS	MEDICAL CARE DIVISION ARKANSAS SOCIAL SERVICES
CALIFORNIA	CHDP BRANCH DEPARTMENT OF HEALTH
COLORADO	DIVISION OF MEDICAL ASSISTANCE
CONNECTICUT	HEALTH ADMINISTRATION DEPARTMENT OF SOCIAL WELFARE
DELAWARE	STATE DEPARTMENT OF HEALTH & SOCIAL SERVICES
DISTRICT OF COLUMBIA	DEPARTMENT OF HUMAN RESOURCES MEDICAL ASSISTANCE DIVISION
FLORIDA	SOCIAL ECONOMIC PROGRAM OFFICE DEPARTMENT OF HEALTH REHABILITATIVE SERVICE
GEORGIA	DEPARTMENT OF MEDICAL ASSISTANCE
GUAM	DEPARTMENT OF PUBLIC HEALTH & SOCIAL SERVICES
HAWAII	MEDICAL CARE ADMINISTRATION DIVISION OF PUBLIC WELFARE

ADDRESS OF AGENCY

2500 FAIRLAND DRIVE
MONTGOMERY, AL 36111

POUCH H-06
JUNEAU, AK 99811

P. O. BOX 1437
LITTLE ROCK, AR 72203

714 P STREET
SACRAMENTO, CA 95814

700 BROADWAY, SUITE 105
DENVER, COLORADO 80203

110 BARTHOLOMEW AVENUE
HARTFORD, CT 06106

P.O. BOX 309
WILMINGTON, DE 19899

614 H STREET, N.E., ROOM 708
WASHINGTON, D.C. 20001

1323 WINEWOOD BLVD
TALLAHASSEE, FL 32301

1010 WEST PEACHTREE STREET, N.W.
ATLANTA, GA 30334

P.O. BOX 2816
AGANA, GUAM 96910

P.O. BOX 339
HONOLULU, HI 96809

STATE	TITLE OF EPSDT AGENCY
IDAHO	DEPARTMENT OF HEALTH & WELFARE
ILLINOIS	MEDICHEK PROGRAM
INDIANA	MEDICAID
IOWA	DEPARTMENT OF SOCIAL SERVICES
KANSAS	STATE DEPARTMENT OF SOCIAL WELFARE
KENTUCKY	DIVISION OF MEDICAL ASSISTANCE DEPARTMENT OF HUMAN RESOURCES
LOUISIANA	DEPARTMENT OF HEALTH & HUMAN RESOURCES FAMILY SERVICES
MAINE	BUREAU OF SOCIAL WELFARE DEPARTMENT OF HEALTH & WELFARE
MARYLAND	MEDICAL ASSISTANCE POLICY ADMINISTRATION DEPARTMENT OF HEALTH & MENTAL HYGENE
MASSACHUSETTS	DIVISION OF MEDICAL ASSISTANCE DEPARTMENT OF SOCIAL WELFARE
MICHIGAN	DEPARTMENT OF SOCIAL SERVICES
MINNESOTA	DEPARTMENT OF PUBLIC HEALTH
MISSISSIPPI	MISSISSIPPI MEDICAID COMMISSION

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MISSOURI	DEPARTMENT OF SOCIAL SERVICES
MONTANA	SOCIAL SERVICES BUREAU
NEBRASKA	STATE DEPARTMENT OF PUBLIC WELFARE
NEVADA	MEDICAL SERVICES, WELFARE DIVISION DEPARTMENT OF HUMAN RESOURCES
NEW HAMPSHIRE	DEPARTMENT OF HEALTH & WELFARE
NEW JERSEY	NEW JERSEY MEDICAID PROGRAM
NEW MEXICO	HEALTH AND SOCIAL SERVICE DEPARTMENT
NEW YORK	DIVISION OF MEDICAL ASSISTANCE NEW YORK STATE DEPARTMENT OF SOCIAL SERVICE
NORTH CAROLINA	DIVISION OF SOCIAL SERVICES DEPARTMENT OF HUMAN SERVICES
NORTH DAKOTA	MEDICAL SERVICES DIVISION
OHIO	DIVISION OF MEDICAL ASSISTANCE OHIO DEPARTMENT OF PUBLIC WELFARE

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STATE	TITLE OF EPSDT AGENCY
OKLAHOMA	DEPARTMENT OF INSTITUTIONS SOCIAL & REHABILITATIVE SERVICES
OREGON	ADULT FAMILY SERVICE DIVISION MEDICHECK SUB-UNIT
PENNSYLVANIA	STATE DEPARTMENT OF PUBLIC WELFARE
PUERTO RICO	MEDICAL ASSISTANCE PROGRAM DEPARTMENT OF HEALTH
RHODE ISLAND	DEPARTMENT OF SOCIAL WELFARE
SOUTH CAROLINA	DEPARTMENT OF SOCIAL SERVICES
SOUTH DAKOTA	MEDICAL SERVICES ADMINISTRATION
TENNESSEE	DEPARTMENT OF PUBLIC HEALTH
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UTAH	MEDICAL SERVICES DIVISION
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STATE	TITLE OF EPSDT AGENCY
VIRGINIA	VIRGINIA MEDICAL ASSISTANCE PROGRAM STATE DEPARTMENT OF HEALTH
WASHINGTON	OFFICE OF MEDICAL ASSISTANCE HEALTH SERVICES DIVISION DEPARTMENT OF SOCIAL & HEALTH SERVICES
WEST VIRGINIA	DIVISION OF MEDICAL CARE STATE DEPARTMENT OF WELFARE
WISCONSIN	DEPARTMENT OF WELFARE
WYOMING	DIVISION OF HEALTH & MEDICAL SERVICES

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